			PTO/SB/22 (12-04)
ETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	
FY 2007 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		PP001681.0002 (2300-1681)	
Application Number: 09/894,845	Filed	: June 27, 2001	
For TOLERANCE AND CHRONIC HEPATITIS C VIRUS			
Art Unit: 1635	Exar	niner: J. Angell	
This is a request under the provisions of 37 CFR 1.136(a) to exapplication.	tend the period for	filing a reply in th	ne above identified
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee S	mall Entity Fee	
One month (37 CFR 1.17(a)(1)) \$	120	\$60	\$
Two months (37 CFR 1.17(a)(2)) \$	460	\$230	\$_460.00
Three months (37 CFR 1.17(a)(3)) \$1	1050	\$525	\$
Four months (37 CFR 1.17(a)(4)) \$1	1640	\$820	\$
Five months (37 CFR 1.17(a)(5)) \$2	2230	\$1115	\$
Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
=			
Payment by credit card.			
The Director has already been authorized to charge fees	in this application	to a Deposit Acc	ount.
The Director is hereby authorized to charge any fees whi			
Deposit Account Number <u>18-1648</u> WARNING: Information on this form may become public. Credi Provide credit card information and authorization on PTO-2038	it card information sh		
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).			
attorney or agent of record. Registration Number <u>33,208</u>			
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34			
M		4/15/0	d
Signature		1/15/0	te .
Roberta L. Robins		(650) 49	
Typed or printed name		Telephone	Number
NOTE: Signatures of all the inventors or assignees of record of the entire interest one signature is required, see below.	or their representative(s	are required. Subm	it multiple forms if more than
Total of 1 forms are submitted.			